



What's New 2002



Your "How To"
Guide For
Open Enrollment



Maricopa County

What's New for 2002

ENROLLMENT PERIOD STARTS OCTOBER 29, THROUGH NOVEMBER 18, 2001

If you are currently enrolled in the Protective Dental plan, you must make an election during Open Enrollment or you will be transitioned automatically to the Employer's Dental Services (EDS) plan. Mariflex participants must re-enroll each year to participate. All of your other current plan elections will remain the same for 2002 unless you change those elections during the enrollment period. Open enrollment changes are effective January 1, 2002.

MEDICAL WAIVER INCREASED!

- The County will compensate you \$75 per month if you work at least 60 hours per pay period and Waive your medical coverage. Proof of other medical coverage must be provided to qualify.

MEDICAL PLAN CHOICES

HEALTHSELECT

- **\$5 office Copay**
- **Prescription Drug Copay**
\$4 generic and \$6 formulary
- **Prescription Home Drug Delivery Service**
\$8 generic and \$12 formulary copay, up to a 90-day supply
- **Increased Wellness Incentives**
 - \$75 Health Club incentive,
 - \$30 variety store gift certificate for Health Screenings,
 - \$30 variety store gift certificate for Children's Immunizations,
 - \$30 variety store gift certificate for Health Education classes.
- **Limited Dental Benefit**
- **Chiropractic Visits Increased to 12 Per Year**
- **Two New In-network Hospitals Added**
St. Joseph's Hospital in Phoenix and Chandler Regional Hospital.

CIGNA

• YOU HAVE 3 CIGNA PLAN CHOICES

- **HMO**
\$10 office co-pay.
\$10 generic/\$15 name brand drug copay.
- **Prime Option (POS)**
\$15 office co-pay
\$10 generic/\$15 name brand drug copay*.
- **Prime Option Plus**
\$5 office co-pay and \$5 drug copay*
- **Out-of Network Benefit**
Offered in Prime Option and Prime Option Plus
- **Chiropractic Visits Increased to 12 Per Year**
*POS plans have certain availability restrictions on their open formulary drugs, such as quantity limits or other requirements that may apply to some medications. All drugs must meet medical necessity criteria for coverage.

VISION

AVESIS VISION (REPLACING SIGHT CARE) A component of the HealthSelect and CIGNA plans.

- **DUAL Choice**
Pick in-network or out-of-network coverage.
- **Stay In-network and Maximize Your Benefit**
 - \$10 copay for a vision exam.
 - Choose Glasses or Contacts.
 - Choose glasses and pay \$10 for standard lenses and frames (within plan allowance; retail \$100 – \$150 check with your provider).
 - Choose contact lenses and receive an additional \$130 annual allowance towards the cost of contact lenses and related professional services.
- **New Out-of-network Benefit Allows You Choice!**
 - Vision Exam \$35 reimbursement.
 - Lenses from \$25 to \$80 reimbursement.
 - Frames up to \$45 reimbursement.
 - Elective contact lenses reimburse at \$130.
- **Variety of providers and locations**
Includes: Nationwide, Eye Masters, Wal-Mart, Pearle Vision, Southwestern Eye Centers and many private doctors.
- **LASIK Surgery Benefit**
Receive a one-time \$150 allowance (in-network only) toward the cost of LASIK surgery in place of all other benefits for that plan year. You must use Southwestern Eye center.

DENTAL

EMPLOYER'S DENTAL SERVICES (EDS) REPLACING PROTECTIVE DENTAL.

➤ **Pre-Paid Dental plan**

- Extensive network of dentists to choose from. Check Web site, www.mydentalplan.net for provider list. **Employees and their dependents must all use same dentist.**
- Shorter wait for new patient appointment (avg. 30 days).
- \$3 copay for exam, x-rays, cleaning, fluoride treatment and oral hygiene.
- No claim forms to file.
- No annual maximum.

- No pre-existing conditions (must complete work in progress).
- Orthodontic benefits are available.
- Specialty care is provided at a discount. Dentists can refer directly to endodontist or pediatric specialist without getting pre-approval from EDS.

➤ ***If you are a current member of Protective Dental and do nothing during the open enrollment you will transition automatically to Employer's Dental Service (EDS) effective January 1, 2002.***

UNITED CONCORDIA DENTAL

➤ **Choice of Providers**

➤ **\$50 Calendar Year Deductible**

➤ **Diagnostic & Preventive Services** covered at 100% of allowed amount.

➤ **Basic Services** covered 80% allowed amount.

➤ **Major Services** covered 50% allowed amount.

➤ **\$2,000 Annual Maximum Per Member**

➤ **50% up to \$1,500 lifetime Orthodontic benefit**

UNUM LIFE INSURANCE REPLACING RELIASTAR.

➤ **Basic Life with AD&D**

➤ **Supplemental Life**

- Supplemental life rates are slightly lower.
- Enhanced accelerated death benefit. Now 50% of current supplemental life insurance benefit or \$750,000, whichever is less.
- Supplemental life maximum has been raised to \$500,000

➤ **New 5 x Salary Benefit Level**

➤ **Basic and Supplemental Life Are Portable** (small increase in premiums)

➤ ***You can increase your supplemental life benefit by one level only during open enrollment. without showing proof of good health.***

UNUM SHORT TERM DISABILITY

➤ **Three levels of coverage to choose from** 50%, 60%, or 70% (max bi-weekly benefit of \$2,000).

➤ **New -14 day elimination period** down from 21 days.

➤ **New-Return to Work Incentive**

Allows you to return to work part-time and continue to receive 100% of your pre-disability wage. (combining your salary and disability benefit).

MARIFLEX FLEXIBLE SPENDING ACCOUNTS

➤ **Mariflex requires you to enroll each year. The plan year begins January 1 and ends December 31.**

Health Care – Put aside up to \$5,200 in tax free dollars to pay for out-of-pocket expenses such as copays, glasses, LASIK surgery, deductibles, orthodontics or mileage.

Some items are not allowed such as cosmetic surgery, over the counter drugs, or insurance premiums.

Money is reimbursed to you, up to plan election, after you submit proof that you actually incurred the expense.

Dependent Care – Put aside up to \$5,000 to pay for child or elder care expenses. You must be able to provide the tax payer identification number of the dependent care provider plus an itemized receipt for reimbursement.

Please review Mariflex booklet for additional information.

PAPER INFORMATION DEPOT SITES

If you are not able to access the Open Enrollment information by computer, you can pick up enrollment material at the following locations. Please help us keep waste and data entry time to a minimum by only using paper if you absolutely cannot access on-line information.

**Benefits Department, County
Administration Bldg.**

301 W. Jefferson Suite 201, Phoenix

Superior Courts

Law Library, 3rd Floor, East Court Bldg.
101 West Jefferson, Phoenix

Flood Control Lobby

2801 W. Durango, Phoenix

**Maricopa Medical Center Admin. Bldg.
East Hallway**

2601 E. Roosevelt, Phoenix

Maricopa Managed Care

2502 E. University, Suite 125, Phoenix

**South East Facility Juvenile Court
Center Admin. Bldg.**

1810 South Lewis, Mesa

2002 OPEN ENROLLMENT FAIR SCHEDULE

Monday 10/29/2001

11:00 am – 1:00 pm
Breezeway – 2nd Floor
MC Administration
301 W. Jefferson, Phx

Tuesday 10/30/2001

11:00 am – 1:00 pm
MMC – Auditorium 3
2601 E. Roosevelt, Phx

Wednesday 10/31/2001

2:30 pm – 4:30 pm
South East Facility Cactus Room
1810 S. Lewis, Mesa

Thursday 11/01/2001

11:00 am – 1:00 pm
Airpark – Bldg. A Finance
2444 E. University, Phx

Monday 11/05/2001

2:00 pm – 4:00 pm
MCDOT Administration
Apache/Cochise Conf. Rooms
2901 W. Durango, Phx

Tuesday 11/06/2001

2:30 pm – 4:30 pm
Juvenile Probation – Room 223
3125 W. Durango, Phx

Wednesday 11/07/2001

7:00 am – 9:00 am
Breezeway – 2nd Floor
MC Administration
301 W. Jefferson, Phx

Wednesday 11/07/2001

11:00 am – 1:00 pm
Public Health – Conference A&B
1825 E. Roosevelt, Phx

Tuesday 11/13/2001

6:00 am – 8:00 am
MMC – Auditorium 3
2601 E. Roosevelt, Phx

Wednesday 11/14/2001

6:00 am – 8:00 am
MCDOT Administration
Apache/Cochise Conf. Rooms
2901 W. Durango, Phx

Wednesday 11/14/2001

11:00 am – 1:00 pm
Airpark – Bldg. A Finance
2444 E. University, Phx

Thursday 11/15/2001

3:00 pm – 5:00 pm
Breezeway – 2nd Floor
MC Administration
301 W. Jefferson, Phx

ENROLLMENT CHECK LIST

1. Remember that Mariflex Flexible spending accounts require you to enroll every year.
2. You can go online to make sure your plan information, coverage options and beneficiary information is correct.
3. If you are interested in the Critical Illness Coverage or the Group Home or Auto Insurance be sure to go on line or stop by an Open Enrollment Fair for more information and enrollment forms.

2002 Premium Rates

Important Reminder: Payroll deductions for the insurance plans will be made each payday, a total of 26 paydays per calendar year. Premiums listed reflect the biweekly payroll deduction. Actual premium deduction may vary by 1 or 2 cents due to rounding.

The following medical insurance plan costs include the cost of the Avesis Vision plan and the Managed Mental Health and Substance Abuse Benefits through CIGNA Behavioral Healthcare.

HEALTHSELECT

	FULL TIME AND PART TIME	FULL TIME AND PART TIME
	County Contribution Per Payday	Employee Cost Per Payday
Employee Only	\$113.01	Free
Employee and Spouse	\$201.76	\$14.42
Employee and Child(ren)	\$171.75	\$11.23
Employee and Family	\$260.41	\$33.87

CIGNA HMO

	FULL TIME		PART TIME	
	60 hours or more per pay period		Between 40 and 59 hours per pay period	
	County Contribution Per Payday	Employee Cost Per Payday	County Contribution Per Payday	Employee Cost Per Payday
Employee Only	\$116.48	\$ 2.48	\$ 76.93	\$42.03
Employee and Spouse	\$205.23	\$29.27	\$134.61	\$99.89
Employee and Child(ren)	\$175.22	\$20.28	\$115.11	\$80.39
Employee and Family	\$263.88	\$47.02	\$172.73	\$138.17

CIGNA PRIME OPTION

	FULL TIME		PART TIME	
	60 hours or more per pay period		Between 40 and 59 hours per pay period	
	County Contribution Per Payday	Employee Cost Per Payday	County Contribution Per Payday	Employee Cost Per Payday
Employee Only	\$116.48	\$ 8.51	\$ 76.93	\$ 48.06
Employee and Spouse	\$205.23	\$41.33	\$134.61	\$111.95
Employee and Child(ren)	\$175.22	\$30.24	\$115.11	\$ 90.35
Employee and Family	\$263.88	\$63.02	\$172.73	\$154.17

CIGNA PRIME OPTION PLUS

	FULL TIME		PART TIME	
	60 hours or more per pay period		Between 40 and 59 hours per pay period	
	County Contribution Per Payday	Employee Cost Per Payday	County Contribution Per Payday	Employee Cost Per Payday
Employee Only	\$116.48	\$34.03	\$76.93	\$73.58
Employee and Spouse	\$205.23	\$92.37	\$134.61	\$162.99
Employee and Child(ren)	\$175.22	\$72.35	\$115.11	\$132.46
Employee and Family	\$263.88	\$130.64	\$172.73	\$221.79

2002 Premium Rates *Continued*

DENTAL

EMPLOYEE DENTAL SERVICES (EDS)

UNITED CONCORDIA

	PRE-PAID DENTAL		INDEMNITY DENTAL	
	County Contribution Per Payday	Employee Cost Per Payday	County Contribution Per Payday	Employee Cost Per Payday
Employee Only	\$1.84	\$1.84	\$5.84	\$5.84
Employee and Spouse	\$3.50	\$3.50	\$12.87	\$12.87
Employee and Child(ren)	\$4.59	\$4.59	\$13.91	\$13.91
Employee and Family	\$5.29	\$5.29	\$17.89	\$17.89

You must have a "Qualified Family Status Change" as defined by the Internal Revenue Code Section 125, in order to change your medical, dental or reimbursement accounts after January 1, 2002. Please see other sections in this brochure for further information on how to make changes to your insurance plans during the course of the plan year.

SHORT TERM DISABILITY PLAN

Paid 100% by Employee

MULTIPLY YOUR BIWEEKLY BASE PAY BY THE FOLLOWING RATE:	BIWEEKLY RATE MULTIPLE OF PAY
40% of Biweekly Base Salary (\$2,000 bi-weekly maximum benefit)*	\$0.0040*
50% of Biweekly Base Salary (\$2,000 bi-weekly maximum benefit)	\$0.0050
60% of Biweekly Base Salary (\$2,000 bi-weekly maximum benefit)	\$0.0060
70% of Biweekly Base Salary (\$2,000 bi-weekly maximum benefit)	\$0.0070

*Closed to new employees effective 1/1/2000.

EXAMPLE OF HOW TO CALCULATE YOUR SHORT TERM DISABILITY PAYROLL DEDUCTION

Annual Salary: \$25,000	50% Premium	60% Premium	70% Premium
Multiply Annual Salary with STD multiplier to determine annual premium	\$25,000 X.005	\$25,000 X.006	\$25,000 X.007
Annual Premium	\$125	\$150	\$175
Divide Annual Premium by 26 (representing 26 pay periods) to determine payroll deduction.	\$125 ÷ 26	\$150 ÷ 26	\$175 ÷ 26
Payroll Deduction	\$4.81	\$5.77	\$6.73

2002 Premium Rates *Continued*

BASIC LIFE INSURANCE

Basic Life with Enhanced Accidental Death & Dismemberment (AD&D)

1 Times Salary, paid by Maricopa County

Supplemental Life Insurance with Enhanced Accidental Death & Dismemberment (AD&D)

1 to 5 Times Salary, paid by Employee.

5 Year Age Categories	Employee Cost Per Payday per \$1,000 of Coverage	Employee Cost Per Payday per \$1,000 of Coverage
	Smoker	Non-Smoker
15- 24	\$0.043538	\$0.031338
25-29	\$0.046538	\$0.035038
30-34	\$0.049538	\$0.042538
35-39	\$0.078538	\$0.046538
40-44	\$0.107538	\$0.057538
45-49	\$0.202538	\$0.093538
50-54	\$0.363538	\$0.162538
55-59	\$0.370538	\$0.206538
60-64	\$0.565538	\$0.343538
65-69	\$0.689538	\$0.482538
70 and Older	\$1.123538	\$0.883538

DEPENDENT LIFE INSURANCE

Paid by Employee

	Option One	Option Two
Spouse	\$5,000	\$10,000
Children, live birth to 14 days	\$1,000	\$ 1,000
14 days to 19 years; 25 years if full time student	\$2,500	\$ 5,000
Employee Cost Per Payday:	\$ 0.77	\$ 1.54

EXAMPLE OF HOW TO CALCULATE YOUR SUPPLEMENTAL LIFE AND AD&D PAYROLL DEDUCTION

Take your annual salary – **Example: \$24,500**

Round up to the nearest \$1,000 and then multiply	1 X Salary	2 X Salary	3 X Salary	4 X Salary	5 X Salary
	\$25,000	\$50,000	\$75,000	\$100,000	\$125,000
Take the Salary amount and divide by \$1,000	1 X Salary	2 X Salary	3 X Salary	4 X Salary	5 X Salary
	25	50	75	100	125

Refer to the Supplement Life Insurance table above to find your age category and cost multiplier

<i>Example: Age 37</i>	<i>0.046538</i>	<i>0.078538</i>	
	<i>Multiplier for Non-Smoking</i>	<i>Multiplier for Smoking</i>	<i>Amount of Coverage</i>
1 X Salary	0.046538 X 25 = \$1.16	0.078538 X 25 = \$1.96	\$25,000
2X Salary	0.046538 X 50 = \$2.33	0.078538 X 50 = \$3.93	\$50,000
3X Salary	0.046538 X 75 = \$3.49	0.078538 X 75 = \$5.89	\$75,000
4 X Salary	0.046538 X 100 = \$4.65	0.078538 X 100 = \$7.85	\$100,000
5 X Salary	0.046538 X 125 = \$5.82	0.078538 X 125 = \$9.82	\$125,000

Who to Contact

Maricopa County Employee Benefits
Maricopa County Administration Building
301 West Jefferson Street, Suite 201
Phoenix, Arizona 85003-2145



EMPLOYEE BENEFITS	PHONE	E-MAIL	WEB ADDRESS
Maricopa County Employee Benefits	602-506-1010 Fax: 602-506-2354	BenefitsService@mail.maricopa.gov	Internet: http://www.maricopa.gov/benefits/ Intranet: http://ebc.maricopa.gov/hr/benefits/
MEDICAL PLANS			
CIGNA	1-800-832-3211 602-271-3000 Tel Drug: 1-800-835-3784		Http://www.cigna.com/consumer/services/healthcare/
HealthSelect Outside Phoenix	602-344-8760 1-800-582-8686		
AVESIS Vision Plan A component of the HealthSelect and CIGNA medical plans	Customer Service 1-800-828-9341	info@avesis.com	www.Avesis.com
CIGNA Behavioral Healthcare A component of the HealthSelect and CIGNA medical plans	Customer Service 1-800-343-2183		
DENTAL PLANS			
United Concordia	1-800-332-0366		Http://www.unitedconcordia.com/members/members.html
Employer's Dental Service (EDS)	602-248-8912 1-800-722-9772		Http://www.mydentalplan.net/
UNUM LIFE INSURANCE AND SHORT TERM DISABILITY			
Short Term Disability	602-506-1627 or 1-800-345-6495X4288		
Life Customer Service	1-800-421-0344		www.unum.com
Life Conversion & Portability	1-800-343-5406		www.unum.com
Life Claims	1-800-445-0402		www.unum.com
OTHER IMPORTANT NUMBERS			
ASI-Mariflex	1-800-659-3035		e-mail: asi@asiflex.com http://www.asiflex.com
Nationwide Retirement Solutions (Deferred Compensation)	1-800-653-4632		e-mail: askus@nationwide.com http://nationaldeferred.nrrsservicecenter.com/nrs/?Site=NDC:
Employee Assistance Outside of Phoenix	602-264-4600 Press 2 1-800-327-3517 Press 2		
Arizona State Retirement System Outside of Phoenix	602-240-2000 1-800-621-3778		http://www.asrs.state.az.us/
Public Safety Retirement System	602-255-5575		http://www.psprs.com/

The benefits described are brief summaries of the County's official plan documents and contracts that govern the plans.
If there is a discrepancy between the information in this booklet and the official documents, the official documents will govern.
All references to year refers to a calendar year.